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## APPLICANTS

Mark Stephen Wilson, Fig Tree Pocket, AUSTRALIA;

\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no  <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY AUSTRALIA	SHEETS DRAWING 4	TOTAL CLAIMS 13	INDEPENDENT CLAIMS 1
Verified and Acknowledged Examiner's Signature _____ Initials _____					

## ADDRESS

23117  
 NIXON & VANDERHYE, PC  
 901 NORTH GLEBE ROAD, 11TH FLOOR  
 ARLINGTON , VA  
 22203

## TITLE

Impact wrench

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